
PEDIATRIC TRAUMA TRIAGE CRITERIA

Birth to 14 Years of Age

Any pediatric trauma patient with one or more of the following conditions requires communication and expeditious packaging and transportation to the closest most appropriate Trauma Center: **Anytime an airway cannot be adequately secured. The patient should be transported to the closest appropriate receiving hospital for airway stabilization.** In San Bernardino County, a Trauma Base Hospital should be contacted for medical control and for destination decisions. In Inyo and Mono Counties, the assigned base hospital should be contacted.

PHYSIOLOGIC CRITERIA

1. GCS \leq 13
2. Abnormal vital signs for age and weight
3. Signs and symptoms of poor perfusion

ANATOMIC CRITERIA

1. Assisted or intubated airway, airway compromise
2. Respiratory distress / multiple times suctioned
3. Penetrating wounds to the head, neck, thorax, abdomen, pelvis, or extremities proximal to the elbow or knee including impaled objects.
4. Chest injuries, suspected rib fractures or significant echymosis.
5. Trauma resulting in paralysis, suspected spinal cord injury or loss of sensation.
6. Open or 2 or more fractures
7. Isolated extremity fracture with suspected neurovascular compromise
8. Suspected pelvic fractures
9. Firm or rigid abdomen.
10. Amputations
11. Traumatic burns (In San Bernardino County contact ARMC)
 - a. $> 10\%$ TBSA or involving face, airway, hands, feet or genitalia
 - b. Any electrical burn
12. Altered mental status
13. Major soft tissue disruption
14. Degloving injury or flap avulsion
15. Open or depressed skull fracture

MECHANISM OF INJURY CRITERIA

1. High energy event – Risk for severe injury
2. Surviving victims of any vehicular accident in which fatalities occurred in the same passenger compartment
3. Falls greater than 3 times the child's height or greater than ten (10) feet.
4. Auto-pedestrian / auto-bike > 5 mph impact or rider/pedestrian thrown or rider/pedestrian run over.

5. Persons ejected from any motorized vehicle.
6. Patients requiring extrication greater than 20 minutes.

ADDITIONAL CRITERIA

1. Any patient exhibiting one or more of the above criteria shall be called into a Trauma Center Base Hospital for medical oversight and consultation as to destination and treatment.
2. If there is a clear history of a loss of consciousness with long-term memory loss and/or vomiting and seizures and none of the above criteria are met, then contact a trauma base for physician consultation to determine appropriate patient destination.
3. In rural or wilderness areas with special circumstances, may, upon written permission from the EMS Medical Director, be exempted from specific criteria.

BURN CLASSIFICATION CHART

MINOR

Child ~ 10% 2nd degree
Child ~ 2% 3rd degree

MODERATE

Child ~ 10-20% 2nd degree
Child ~ <10% 3rd degree

MAJOR

Child ~ 20% 2nd degree
Child ~ >10% 3rd degree
All electrical burns
All inhalation injuries
All burns with other associating traumas
All high risk (small children or poor health)
All burns to face, genitals, palms, or soles of feet

